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hands, well and good. Our responsibility ceases; our point has been made when the line of demarcation is clear. There is no confusion to-day between the doctor and the nurse. When the family has engaged the nurse it knows that it has not engaged a doctor; it does not know, however, that it has not engaged an untrained attendant. From the statistics previously presented it is not unreasonable to imagine that, in nine out of ten cases, this is what it has, and probably unwittingly, procured.

We have no fear, with proper legal protection, of the encroachment of the attendant upon the domain of the nurse. We do not understand that any decrease resulted in the ranks of the medical profession with the advent of the nurse; what we do understand is, though we may be mistaken, that the medical profession is vigorously protesting against an increase in its numbers at the cost of its standards, and, therefore, ultimately, at the cost of the public health.

Into this effort to standardize nursing should not be read an encroachment upon the domain of medicine; what could and should be read into it is a great tribute to the members of the medical profession, for it is they who are responsible for the largeness of our concept. Through their eyes we have grasped the significance of intelligent, accurate detail work in the care of the sick. It is our realization that the great truths which they are seeking may be imperilled, or may be hastened in no small measure, by these agents, that impels us to strive so earnestly and unremittingly for higher and better standards. The standards we are striving for, for the protection of their scientific conclusions alone, the medical profession should demand.

THE NURSING OF QUADRUPLETS

By EMILY O. BOSWALL

Graduate of Boston City Hospital Training School

"The tumult and the shouting die;
The captains and the kings depart."—KIPLING.

THIS means that the newspaper reporters have found other subjects to interest them and have ceased to collect, or manufacture, items about the quadruplets.

They were born August 5, 1912, in the Dorchester Cottage Hospital, which is owned and managed by two graduates of the training school of the Boston City Hospital.

Into this unfriendly world, but into the hands of kindly people, came one tiny baby, then a second little stranger, then to the astonish-

ment of doctor and nurses came a third, and after a short delay, came the fourth, the largest and prettiest of the little sisters.

There was but one placenta. As the pregnancy was of only seven-and-a-half months' duration, the brooder was immediately prepared, the tiny creatures carefully cleansed and oiled and wrapped in soft flannel. Three were placed in the brooder, and one on a bed with hot water bags and light, warm coverings.

The aggregate weight of the babies was about 14 pounds. Virginia weighed nearly four pounds, Eleanor nearly three, Barbara over three, and Louise four pounds.

The father was waiting below. His state of mind when he was told of his four little daughters may be better imagined than described. The mother was told there were twin daughters, but not that there were quadruplets, till the day before she left the hospital.

The mother had passed only four ounces of urine on August 5; on August 6 and 7 she passed 196 and 190 ounces, respectively. She made a quick recovery and was able in three weeks to go to her home. By this time her milk began to come in, and it was drawn by the breast pump and sent to the hospital to help out the milk of the wet nurses.

To return to the babies, a heap of "emie jackets" was prepared. A wet nurse was obtained from the Salvation Army Maternity Home, a healthy young girl with a pitiful story and a big beautiful boy. He was put on modified milk, and her milk was drawn and carefully bottled for the quadruplets. Feeding was started the day after birth. At first they were fed with a dropper. Each one got 3i every two hours. Infinite care and patience were exercised in the feeding. Virginia and Eleanor had an appetite from the first. Barbara was the most difficult to feed. Louise took time. There was a special nurse by day, and one by night, besides the wet nurse.

The babies were perfect in every respect. Virginia and Eleanor resembled each other in many particulars,—the shape of the heads, the expression when quiet or crying, the cry itself, the quickly developed appetite and the way they took water. Eleanor seemed to have more active bowels. Barbara and Louise also had a marked likeness, but Louise was a really pretty baby, and very attractive.

The babies were put into *emie* jackets, and each one had her regular period on the bed. The brooder was kept at about 80°, with the lid up when the windows were closed. As the weather was very warm it was easy, by changing the water in the brooder, to keep the heat up. The babies were put on two-hour feedings, the quantity given being increased gradually. The nurses were instructed to give warm water frequently. Olive oil was used for the laxative.

As the babies grew stronger they were fed alternately with the dropper, and by the rubber nipple, and then, later, all save Barbara took the bottle regularly. In the night Barbara would take half of her tiny portion from the bottle, and then the rest was fed by the dropper.

By September 1, a second wet nurse was engaged, and the babies, having plenty of food, settled down to gain steadily. The following table shows the rate of increase:

	At Birth—Aug. 5.	Sept. 5.	Nov. 5.	Dec. 5.
Virginia	Nearly 4 lb.	4 lb. 8 oz.	7 lb. 2 oz.	8 lb. 11 oz.
Eleanor	Nearly 3 lb.	4 lb.	6 lb. 2 oz.	6 lb. 11 oz.
Barbara	Over 3 lb.	4 lb. 1 oz.	6 lb. 2 oz.	7 lb. 2 oz.
Louise	4 lb.	4 lb. 8 oz.	7 lb. 1 oz.	8 lb. 7 oz.

Between September fifth and twelfth the babies learned to nurse directly from the breast, and they did this except when fed the milk of their own mother, which was being sent daily to the hospital, and was of good quality and a steadily increasing quantity up to thirteen ounces a day.

On September 14, it was decided to move the babies and their wet nurses to a small hospital nearly opposite the home of the parents, so that the mother might nurse two of the babies in the daytime. The removal was made very quietly and carefully.

It will be seen from the table that the first-born has taken the lead. The babies are still on breast milk, they are thriving and all are looking well, though Eleanor is not gaining in weight as fast as the others. On December 5, they had been four months in the world, but if born at term would have been but two and a half months old. The parents are of American ancestry for many generations. As far back as the family records go there is no mention of twins. They have a small son aged five.

INFANTILE PARALYSIS

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Summarizing these symptoms, then, there is a very common and well-defined picture of a feverish child with some gastro-intestinal disturbance, frequently only loss of appetite, drowsy but irritable, tender to handle, and with stiffness of neck and back.